

Sector *[initials]*

Attorney Docket No.: 5655.204-US

PATENT

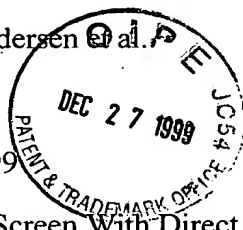
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Pedersen *[initials]*

Serial No.: 09/390,851

Filed: September 7, 1999

For: Enzyme Activity Screen With Direct Substrate Reloading



Group Art Unit: To be assigned

Examiner: To be assigned

CERTIFICATE OF MAILING UNDER 37 CFR 1.8(a)

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

I hereby certify that the attached correspondence comprising:

1. Petition and Fee For Extension of Time (in duplicate)
2. Response to Notice to File Missing Parts (in duplicate)
3. Copy of Notice to File Missing Parts
4. Executed Combined Declaration and Power of Attorney

is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Commissioner of Patents and Trademarks
Washington, DC 20231

on December 23, 1999.

Gina Maldonado
(name of person mailing paper)

G Maldonado
(signature of person mailing paper)

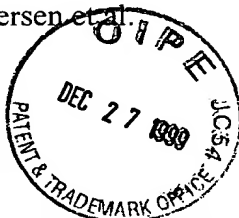
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Pedersen et al.

Serial No.: 09/390,851

Filed: September 7, 1999

For: Enzyme Activity Screen With Direct Substrate Reloading



Group Art Unit: To be assigned

Examiner: To be assigned

RESPONSE TO NOTICE TO FILE MISSING PARTS

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

In response to the Notice to File Missing Parts dated September 30, 1999 (a copy thereof is attached hereto), Applicants submit the Combined Declaration and Power of Attorney signed and dated by Applicants for the above-captioned application.

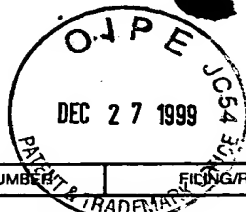
Please charge the required fee, estimated to be \$130.00, to Novo Nordisk of North America, Inc., Deposit Account No. 14-1447. Please credit any overpayment to Deposit Account No. 14-1447. A duplicate of this sheet is enclosed.

Respectfully submitted,

Date: December 23, 1999

A handwritten signature in cursive script, appearing to read 'Reza Green', written over a horizontal line.

Reza Green, Reg. No. 38,475
Novo Nordisk of North America, Inc.
405 Lexington Avenue, Suite 6400
New York, NY 10174-6401
(212) 867-0123



UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office
 Address: COMMISSIONER OF PATENTS AND TRADEMARKS
 Washington, D.C. 20231

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NO./TITLE
09/390,851	09/07/99	PEDERSEN	H 5655.204-US

0242/0930
 STEVE T ZELSON ESQ
 NOVO NORDISK OF NORTH AMERICA INC
 405 LEXINGTON AVENUE
 SUITE 6400
 NEW YORK NY 10174-6401

NOT ASSIGNED

1643
 DATE MAILED:

09/30/99

NOTICE TO FILE MISSING PARTS OF APPLICATION
Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given **TWO MONTHS FROM THE DATE OF THIS NOTICE** within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the **SURCHARGE** set forth in 37 CFR 1.16(e) of ☐ \$65.00 for a small entity in compliance with 37 CFR 1.27, or ☒ \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a ☐ small entity (statement filed) ☒ non-small entity is \$ 130.00.

- ☐ 1. The statutory basic filing fee is:
 - ☐ missing.
 - ☐ insufficient.
 Applicant must submit \$ _____ to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- ☐ 2. The following additional claims fees are due:
 - \$ _____ for _____ total claims over 20.
 - \$ _____ for _____ independent claims over 3.
 - \$ _____ for multiple dependent claim surcharge.
 Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.
- ☒ 3. The oath or declaration:
 - ☒ is missing or unsigned.
 - ☐ does not cover the newly submitted items.
 An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.
- ☐ 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.
 A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- ☐ 5. The signature of the following joint inventor(s) is missing from the oath or declaration: _____
 An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the omitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.
- ☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).
- ☐ 7. Your filing receipt was mailed in error because your check was returned without payment.
- ☐ 8. The application was filed in a language other than English.
 Applicant must file a verified English translation of the application, the \$130.00 set forth in 37 CFR 1.17(k), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).
- ☐ 9. OTHER: _____

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

A copy of this notice MUST be returned with th reply.

Harker, D 74
 Customer Service Center
 Initial Patent Examination Division (703) 308-1202

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